



# **Workplace Violence Prevention Plan (WVPP)**

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## **PROGRAM OBJECTIVES AND POLICY STATEMENT**

In the WORKPLACE VIOLENCE PREVENTION PLAN, completed on June 4<sup>th</sup>, 2024, DEB Construction, LLC will hereinafter be referred to as "DEB Construction" located at 2230 E Winston Rd Anaheim CA 92806.

DEB Construction is committed to ensuring the safety and well-being of its employees, to providing an environment free of violence or threats of violence and to safeguarding all employees and all other workers whom the DEB Construction controls or directs and directly supervises on the job to the extent that workers are exposed to hazards specific to their worksite and job assignment.

DEB Construction prohibits and will not tolerate any form of workplace violence by any employee or third party, including customers, clients, vendors, visitors, or others, either at the workplace, in or on DEB Construction property or at DEB Construction-sponsored events.

This Workplace Violence Prevention Plan ("WVPP" or "Plan") is intended to supplement the general Injury and Illness Prevention Program ("IIPP") required by 8 CCR § 3203. This Plan is in effect at all times in all work areas and is intended to be specific to the hazards and corrective measures for each work area and operation.

The WVPP shall be available to employees, authorized employee representatives and Cal/OSHA at all times.

DEB Construction shall provide all safeguards required by law and regulation, including provision of personal protective equipment and training at no cost to the employee, at a reasonable time and place for the employee, and during the employee's paid time.

The primary objective of the WVPP is to prevent and/or eliminate workplace violence as follows:

- Establish and maintain an effective WVPP.
- Provide a safe working environment.
- Establish policies, training and communications to improve workplace violence prevention.
- Provide written records of workplace violence incidents and investigations, in accordance with the Plan.

DEB Construction hereby authorizes and ensures the establishment, implementation, and maintenance of this Plan and the documents/forms within this Plan. DEB Construction is committed to a culture of safety and violence prevention. These policies and procedures will bring positive changes to the workflow, business operations, and overall health and safety of DEB Construction's employees.

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Scott Shellhammer  
DEB Construction President

## DEFINITIONS

### A. REQUIRED DEFINITIONS

1. **Emergency:** unanticipated circumstances that can be life threatening or pose a risk of significant injuries to employees or other persons.
  2. **Engineering controls:** an aspect of the built space or a device that removes a hazard from the workplace or creates a barrier between the employee and the hazard.
  3. **Log:** the violent incident log required by this Plan.
  4. **Plan:** this Workplace Violence Prevention Plan.
  5. **Threat of violence:** any verbal or written statement, including, but not limited to, texts, electronic messages, social media messages, or other online posts, or any behavioral or physical conduct, that conveys an intent, or that is reasonably perceived to convey an intent, to cause physical harm or to place someone in fear of physical harm, and that serves no legitimate purpose.
  6. **Workplace violence:** any act of violence or threat of violence that occurs in a place of employment, including, but not limited to, the following: (i) the threat or use of physical force against an employee that results in, or has a high likelihood of resulting in, injury, psychological trauma, or stress, regardless of whether the employee sustains an injury; (ii) an incident involving a threat or use of a firearm or other dangerous weapon, including the use of common objects as weapons, regardless of whether the employee sustains an injury; and (iii) the following four workplace violence types:
    - A. **Type 1 violence:** workplace violence committed by a person who has no legitimate business at the worksite, including violent acts by anyone who enters the workplace or approaches employees with the intent to commit a crime.
    - B. **Type 2 violence:** workplace violence directed at employees by customers, clients, patients, students, inmates, or visitors.
    - C. **Type 3 violence:** workplace violence against an employee by a present or former employee, supervisor, or manager.
    - D. **Type 4 violence:** workplace violence committed in the workplace by a person who does not work there but has or is known to have had a personal relationship with an employee.
- Workplace violence does not include lawful acts of self-defense or defense of others.
7. **Work practice controls:** procedures and rules which are used to effectively reduce workplace violence hazards.
  8. **Alarm:** a mechanical, electrical, or electronic device that does not rely upon an employee's vocalization in order to alert others.

**9. Environmental risk factors:** factors in the facility or area in which services or operations are conducted that may contribute to the likelihood or severity of a workplace violence incident, including, but not limited to, risk factors associated with the specific task being performed, such as the collection of money.

**10. Serious injury or illness:** Any injury or illness occurring in a place of employment or in connection with any employment that requires inpatient hospitalization for other than medical observation or diagnostic testing, or in which an employee suffers an amputation, the loss of an eye, or any serious degree of permanent disfigurement, but does not include any injury or illness or death caused by an accident on a public street or highway, unless the accident occurred in a construction zone.

**RESPONSIBLE PERSONS**

The Health and Safety Officer and Health and Safety Administrator have the authority and responsibility for implementing and maintaining this Plan for DEB Construction. In the absence of the Health and Safety Officer and/or Health and Safety Administrator the person with authority and responsibility for implementation of this Plan, the DEB Construction President, is the immediate supervisor of affected employee[s].

Division heads, managers, supervisors and employees will be accountable for the implementation and maintenance of this program. Managers, supervisors and lead workers are responsible for implementing and maintaining the Plan in their areas of responsibility and will provide day-to-day program support, guidance and training to the individual employees on DEB Construction’s WVPP.

A copy of the WVPP is available from each manager and supervisor.

<b>ROLE</b>	<b>NAME</b>	<b>PRIMARY RESPONSIBILITY</b>	<b>CONTACT INFORMATION</b>
General Superintendent/ Health and Safety Officer	Timothy Jones	General Superintendent of Field employees and safety compliance.	Work Cell: (714) 318-9379  Email: tjones@debconstruction.com
HR Manager/ Health and Safety Administrator	Jean Lee	HR Manager of DEB employees and safety compliance.	Work Cell: (714) 318-2600  Email: jlee@debconstruction.com
President	Scott Shellhammer	President	Work Cell: (714) 904-9879  Email: sshellhammer@debconstruction.com

**A. EMPLOYEE ACTIVE INVOLVEMENT – GENERAL**

DEB Construction shall obtain the active involvement of employees in developing, implementing, reviewing and revising the Plan, including, but not limited to, through their participation in identifying, evaluating, and correcting workplace violence hazards, in designing and implementing training, and in reporting and investigating workplace violence incidents.

**B. OPTIONS TO OBTAIN EMPLOYEE INVOLVEMENT**

**1. Designated Role**

The Health and Safety Officer and/or Health and Safety Administrator shall obtain the active involvement of employees in developing and implementing the Plan, including their

participation in identifying, evaluating, and correcting workplace violence hazards; designing and implementing training; reporting and investigating workplace violence incidents, and in reviewing the Plan. The Health and Safety Officer and/or Health and Safety Administrator may carry out their responsibilities by the methods listed below:

## 2. **Committee or Task Force**

DEB Construction shall maintain a Health and Safety Committee.

This committee shall be under the direction of the Health and Safety Officer, or designee. The committee should operate with close contact and communication with the division heads, program coordinators, administration, department managers, managers and supervisors.

This committee shall obtain the active involvement of employees in developing and implementing the Plan, including their participation in identifying, evaluating, and correcting workplace violence hazards; designing and implementing training; reporting and investigating workplace violence incidents, and in reviewing the Plan. The Committee may carry out its responsibilities by the methods listed below:

### **C. METHODS TO OBTAIN EMPLOYEE INVOLVEMENT**

1. Providing the Plan to employees at no cost before the Plan is implemented and soliciting feedback from employees.
2. Interviewing employees regarding the Plan and/or violence at DEB Construction.
3. The Health and Safety Officer and/or Health and Safety Administrator will attend staff meetings of different departments throughout DEB Construction to obtain employee input.
4. Conducting committee meetings and employee meetings.
5. Maintaining a hotline, posters, forms, an internal site, and a QR code where employees can provide suggestions, feedback or concerns regarding the Plan and/or violence at DEB Construction.
6. Distributing a survey regarding the Plan and workplace violence at DEB Construction.
7. Preparing written records of workplace violence issues discussed at committee meetings and employee meetings, making copies of the records available to all affected employees and maintaining the records on file.
8. Communicating safety and health issues to each facility and site, coordinating training, developing incentive programs or other special safety programs.
9. Providing the approved version of the Plan to employees at no cost and soliciting feedback from employees.

## **COORDINATION**

DEB Construction shall coordinate implementation of the Plan with all other employers whose employees (“third-party employers and/or employees”) work in DEB Construction facilities and sites. This is to ensure that all personnel at the worksite understand their respective roles as provided in the Plan, that all employees are provided the training required by the Plan, and that workplace violence incidents involving any employee are reported, investigated, and recorded in the Workplace Violence Incident Log. At a multi-employer worksite, DEB Construction shall ensure that if its employees experience workplace violence incident, DEB Construction shall record the information in its Workplace Violence Incident Log (Attachment D) and shall also provide a copy of the relevant Workplace Violence Incident Log to the controlling employer.

DEB Construction may coordinate the implementation of the Plan with other employers by the following methods:

### **A. METHODS TO COORDINATE THE PLAN**

1. Prepare a list of third-party employers in DEB Construction’s facilities and sites.
2. Designate the Health and Safety Officer and/or Health and Safety Administrator as the point of contact for third-party employers in DEB Construction’s facilities and sites.
3. Provide all third-party employers a copy of the relevant worksite Plan and obtain copies of each third-party employer’s Plan.
4. Provide third-party employers with DEB Construction’s training materials.
5. Determine the appropriate training for third-party employees by their respective job duties, as provided in this Plan and determine which employer will provide the training.
6. The DEB Project Management team shall provide all third-party employers with the WVPP at project award, and/or the submittal process, and will request the third-party employer's WVPP, in accordance with the DEB WVPP requirements, prior to commencing any contract work.
7. Ensure all third-party employees receive and review the Plan when they begin working in DEB Construction’s facilities and sites.
8. Require all third-party employees to report all reportable incidents (as defined in this Plan) to the appropriate supervisor, manager or other designated person, and participate in any investigations, as required by this Plan, DEB Construction’s IIPP and/or other DEB Construction policy.
9. Coordinate procedures with third-party employers for reporting, investigating and documenting workplace violence incidents.
10. Provide third-party employers with reports of workplace violence concerns and incidents and records of workplace violence investigations to ensure a coordinated response.
11. Meet with third-party employers when reviewing an incident to discuss the Plan, any revisions to the Plan, any recent workplace violence incidents and relevant training.



12. Review contracts with third-party employers regarding the responsibilities of each party; regarding which entity is responsible for training third-party employees and for reporting, investigating and documenting workplace violence incidents involving third-party employees.
13. Document which third-party employers have assumed responsibility for training and for reporting, investigating and documenting workplace violence incidents involving third-party employees.

## COMMUNICATION

DEB Construction recognizes that to maintain a safe, healthy and secure workplace, it must have open, two-way communication between all employees, including managers and supervisors, and other employers on all workplace safety, health and security issues. DEB Construction's communication procedures are designed to encourage and facilitate a continuous flow of information between management, employees and other employers regarding any suggestions, concerns or information relating to health, safety or security issues, without fear of reprisal and in a form that is readily understandable by all affected employees.

DEB Construction will ensure that all workplace violence policies and procedures within this Plan are clearly communicated to and understood by all employees, including any revisions to the Plan, in accordance with the "Plan Review" section of this Plan.

All employees may communicate suggestions, concerns or information regarding workplace violence either directly to their supervisor or manager or in accordance with this section and the "Reports of Workplace Violence" section of this Plan.

No employee will be subject to any discipline, retaliation or reprisal for reporting or communicating regarding workplace violence or any injury resulting from workplace violence.

DEB Construction's communication procedures may include the following items:

### **A. REQUIRED COMMUNICATIONS WITH EMPLOYEES REGARDING WORKPLACE VIOLENCE MATTERS**

In addition to any other communications required by this Plan, DEB Construction shall communicate with employees regarding:

1. How an employee can report a violent incident, threat, or other workplace violence concern to the DEB Construction or law enforcement without fear of reprisal. Please see the "Reports of Workplace Violence" section of this Plan.
2. How employee concerns will be investigated in a timely manner and how employees will be informed of the results of the investigation and any corrective actions to be taken, in accordance with the "Hazard Identification, Evaluation and Correction," and "Investigation and Post Incident Response" sections of this Plan.

### **B. METHODS FOR COMMUNICATING WITH EMPLOYEES REGARDING WORKPLACE VIOLENCE MATTERS**

1. New employee orientation on workplace security policies, procedures and work practices, including the Plan.
2. The Health and Safety Office and/or Health and Safety Administrator will attend staff meetings of different departments throughout DEB Construction to obtain employee input.

3. Conducting periodic committee meetings and employee meetings that address security issues and potential workplace violence hazards. All meetings should be documented, including, but not be limited to, signed attendance rosters, agenda for items discussed and minutes of the meetings.
4. Communicating safety and health issues to each facility and site.
5. Posted or distributed workplace safety and violence prevention information, including regarding any identified workplace violence hazards.
6. Maintaining a hotline, posters, forms, an intranet site, QR code where employees can provide suggestions, feedback or concerns regarding the Plan and/or violence at DEB Construction.
7. Distributing a survey periodically regarding the Plan and workplace violence at DEB Construction.
8. Procedures for employees to inform DEB Construction about workplace security hazards, workplace violence or threats of violence, including in accordance with the "Reports of Workplace Violence" section of this Plan.
9. Making the Plan available to all employees upon request at no cost.
10. Training and re-training programs, as provided in the Plan.
11. Updating employees on the status of investigations and corrective actions through email and at meetings, including the progress of investigations, the results of investigations, and any corrective actions taken.
12. Effective communication between employees and supervisors and managers about workplace violence concerns, including in accordance with the "Reports of Workplace Violence" and "Hazard Identification, Evaluation and Correction" sections of this Plan. Any communication between employees and supervisors will be in the employee's first language.

## **REPORTS OF WORKPLACE VIOLENCE**

DEB Construction requires all employees to report workplace violence (including threats of violence), as described below. DEB Construction requires completion of a Workplace Violence Incident Report Form (Attachment A) when workplace violence occurs, except as described below. The affected employee or the person receiving the report may complete the Workplace Violence Incident Report Form.

In addition, employees may communicate suggestions, concerns or information regarding workplace violence either directly to their supervisor or manager or in accordance with this section and the "Communications" section of this Plan.

No DEB Construction or third-party employee will be subject to any discipline, retaliation or reprisal for reporting a concern regarding workplace violence, workplace violence or any injury resulting from workplace violence to DEB Construction or law enforcement. Any employee, including any supervisor or manager, who retaliates against an employee for reporting a concern regarding workplace violence, workplace violence or any injury resulting from workplace violence is subject to discipline, up to and including termination. Depending on the nature of the incident and the content of any report made to law enforcement or DEB Construction, DEB Construction may provide an employee with counseling or training, as warranted, regarding appropriate circumstances to make a report of workplace violence.

Nothing in this policy shall prevent an employee from accessing the employee's cellular telephone or other communication devices to seek emergency assistance, assess the safety of an emergency situation, or communicate with a person to verify their safety.

Incidents of workplace violence must be reported. Reports may be completed and submitted as follows:

### **A. WORKPLACE VIOLENCE MAY BE REPORTED TO THE FOLLOWING**

1. To the employee's immediate supervisor or manager.
2. To DEB Construction security.
3. To the Health and Safety Officer and/or Health and Safety Administrator.
4. Using a hotline, poster, form, internal site, and/or QR code where employees can report workplace violence, threats or concerns.
5. To law enforcement, as appropriate.

Any person receiving a report of workplace violence shall forward it to the Health and Safety Officer and/or Health and Safety Administrator.

The Health and Safety Officer and/or Health and Safety Administrator shall accept and respond to reports of workplace violence, as described in this Plan. In addition to reviewing the Workplace Violence Incident Report as described above, the Health and Safety Officer and/or Health and Safety Administrator is responsible for recording information relating to

each occurrence of workplace violence on the Workplace Violence Incident Log (Attachment D).

If workplace violence results in an injury requiring the completion of other documents, such as a California Department of Industrial Relations Form 5020 (Employer’s Report of Occupational Injury or Illness), the Cal/OSHA Form 301 Injury and Illness Incident Report, and/or California Department of Industrial Relations, Division of Workers’ Compensation Form DWC-1 (Workers’ Compensation Claim Form), then no Workplace Violence Incident Report Form is required. All forms are processed and stored in accordance with the applicable laws and regulations relating to those forms. Even if no Workplace Violence Incident Report Form is completed, **the information required by this Plan must still be recorded in the Violent Incident Log.**

Employees may also report incidents of workplace violence to law enforcement, as appropriate.

Emergency Situations

During any emergency situation, any DEB Construction personnel observing the situation should:

1. Get to safety.
2. Call 911 when safe to do so.

Non-Emergency Situations

Contact numbers for local law enforcement and emergency services agencies may be available in every facility and site and are also provided below. During any non-emergency situation, employees involved in a workplace violence incident must report it, as described above. The Health and Safety Officer and/or Health and Safety Administrator may then report the incident to law enforcement, if warranted.

CONTACT	NUMBER	EMAIL	PHYSICAL LOCATION/OTHER CONTACT INFORMATION
Anaheim Police Department	(714) 765-1900	N/A	425 S Harbor Blvd Anaheim, CA 92805
Orange County Sherrif’s Department - Headquarters	(714) 647-7000	N/A	550 N Flower St Santa Ana, CA 92703
San Jose Police Department	(408) 277-8900	N/A	201 W Mission St San Jose, CA 95110
Santa Clara County Sheriff’s Office	(408) 299-2311	so.website@shf.sccgov.org	55 W Younger Ave San Jose, CA 95110

Any employees who report workplace violence and believe they are being subjected to discipline, retaliation or reprisal should report it to the Health and Safety Officer and/or Health and Safety.

## **RESPONSE TO WORKPLACE VIOLENCE**

In addition to the other provisions of this Plan, DEB Construction shall respond to actual or potential workplace violence, including emergencies, by the methods described below.

No DEB Construction or third-party employee will be subject to any discipline, retaliation or reprisal for reporting workplace violence or any injury resulting from workplace violence to DEB Construction or law enforcement.

Employees may always obtain help from the individuals identified in the "Responsible Persons" and "Reports of Workplace Violence" sections of this Plan.

### **A. REQUIRED RESPONSES TO ACTUAL OR POTENTIAL WORKPLACE VIOLENCE EMERGENCIES**

1. Making this Plan available to employees.
2. Informing employees how to obtain help from Health and Safety Officer and/or Health and Safety Administrator law enforcement. Employees may contact law enforcement by dialing 911. The contact information for DEB Construction personnel is listed in the "Reports of Workplace Violence" section of this Plan. The contact information for local law enforcement is based on office and job site location.
3. Effective means to alert employees of the presence, location and nature of workplace violence emergencies by the following:
  - a. Text alerts and/or email alerts
4. Developing and informing employees of evacuation and sheltering plans that are appropriate and feasible for the employees' worksite and when to implement those plans, including the following:
  - a. Placing maps of evacuation routes on each DEB Safety Board, at offices and job sites.
  - b. Placing locations of emergency exits on each DEB Safety Board, at offices and job sites.
  - c. Instructing employees when and where to shelter in place on each DEB Safety Board, at offices and job sites.

### **B. [OPTIONAL RESPONSES TO ACTUAL OR POTENTIAL WORKPLACE VIOLENCE EMERGENCIES]**

1. Posted or distributed workplace safety information, including regarding any identified and/or potential workplace violence hazards.
2. Conducting periodic committee meetings and yearly employee meetings. All meetings should be documented, including, but not be limited to, signed attendance rosters,

agenda for items discussed, and the name and title of the personnel conducting the meeting.

3. Distributing a survey periodically regarding the Plan and workplace violence at DEB Construction.

## COMPLIANCE

DEB Construction is committed to ensuring that all safety and health policies and procedures involving workplace security, including this Plan, are clearly communicated and understood by all employees.

All employees are responsible for using safe work practices, for following all directives, policies and procedures, including this Plan, and for assisting in maintaining a safe and secure work environment. Failure to follow this Plan, DEB Construction's IIPP or any other applicable DEB Construction directives, policies or procedures is grounds for discipline, up to and including termination. Managers and supervisors will enforce this Plan fairly and uniformly.

In addition to methods provided in other sections of this Plan, DEB Construction's system to ensure that employees, including supervisors and managers, comply with this Plan and the rules and work practices that are designed to make the workplace more secure, and do not engage in threats or physical actions which create a security hazard for others in the workplace, include at a minimum, those listed below:

### A. REQUIRED COMPLIANCE PROCEDURES

1. Making this Plan available to employees. When an employee requests a copy of this Plan, DEB Construction shall provide the requester with a printed and electronic copy of the Plan.
2. Recognizing employees who follow safe and healthful work practices which promote security in the workplace by recognition through the DEB Health and Safety Program.
3. Training programs as provided in the Plan, and any necessary re-training, including re-training for any employee whose safety performance is deficient.
4. Disciplining employees for failure to comply with this Plan, DEB Construction's IIPP, and/or workplace security practices in accordance with DEB Construction's Employee Handbook.
5. Periodic inspections of the worksite in accordance with the "Hazard Identification, Evaluation and Correction" section of this Plan.

### B. OPTIONAL COMPLIANCE PROCEDURES

1. New employee orientation on workplace security policies, procedures and work practices, including the Plan.
2. Providing employees with access through a QR code to a server or website, which allows an employee to review, print, and email the current version of this Plan. Access through a QR Code means that the employee, as part of their regular work duties, predictably and routinely uses electronic means to communicate with management or co-employees.



3. Posted or distributed workplace safety information, including regarding any identified workplace violence hazards.
4. Conducting periodic committee meetings and yearly employee meetings. All meetings should be documented, including, but not be limited to, signed attendance rosters, the name and title of the personnel conducting the meeting, an agenda for items discussed.
5. Counseling, including for employees whose performance is deficient in complying with work practices designed to ensure workplace security.
6. Evaluating the performance of all employees in complying with this Plan and DEB Construction's security measures by periodic and unscheduled inspections.
7. Maintaining a hotline, forms, an internal site, and a QR code] where employees can provide suggestions, feedback or concerns regarding the Plan and/or violence at DEB Construction.
8. Distributing a survey periodically regarding the Plan and workplace violence at DEB Construction.

## **TRAINING**

DEB Construction is committed to ensuring that all employees have effective general and job-specific training on workplace security practices that address the workplace violence risks that employees may reasonably anticipate encountering in their jobs.

DEB Construction shall use training material appropriate in content and vocabulary to the educational level, literacy and language of employees.

All training conducted in accordance with this Plan shall permit an opportunity for interactive questions and answers with a person knowledgeable about the Plan. Training may involve presentations, discussions, and/or practical exercises.

All training must be documented by using the Training Log (Attachment B). Individual training records shall be placed in the employee's personnel file at 2230 E Winston Ave Anaheim CA 92806. All training records shall be kept on file for a minimum of one (1) year.

### **A. REQUIRED EMPLOYEE INVOLVEMENT**

DEB Construction shall obtain the active involvement of employees in designing and implementing all required training under this Plan. DEB Construction may obtain this involvement by the following methods:

#### **1. OPTIONS TO OBTAIN EMPLOYEE INVOLVEMENT**

##### **a. Designated Role**

DEB Construction and/or the Health and Safety Officer and/or Health and Safety Administrator shall obtain the active involvement of employees in designing and implementing training required under the Plan. DEB Construction and/or the Health and Safety Officer and/or Health and Safety Administrator may carry out their responsibilities by the methods listed below:

##### **b. Committee or Task Force**

DEB Construction shall maintain a Health and Safety Committee.

This committee shall be under the direction of the Health and Safety Officer and/or Health and Safety Administrator or designee. The committee should operate with close contact and communication with the division heads, program coordinators, administration, department managers, managers and supervisors.

This committee shall obtain the active involvement of employees in designing and implementing training required under the Plan. The Committee may carry out its responsibilities by the methods listed below:

#### **2. METHODS TO OBTAIN EMPLOYEE INVOLVEMENT**

1. Providing training materials to employees before training is implemented and during the annual Plan review and soliciting feedback from employees.
2. Informing employees, supervisors, and managers of the training required under the Plan and proposed changes to the training required under the Plan.
3. Interviewing employees regarding DEB Construction's training.
4. The Health and Safety Officer and/or Health and Safety Administrator will attend staff meetings of different departments throughout DEB Construction to obtain employee input regarding training.
5. Conducting periodic committee meetings and employee meetings.
6. Maintaining a hotline, posters, forms, an internal site, and a QR code where employees can provide suggestions, feedback or concerns regarding training under the Plan.
7. Distributing a survey periodically regarding training under the Plan.

## **B. Type of Training and Timing**

### **1. General Workplace Security Training – New Hire and Annually**

DEB Construction shall provide training (1) when this Plan is first established, to all new employees, and to all employees annually; (2) to other employees for whom training has not previously been provided and to all employees, supervisors and managers given new job assignments for which specific workplace security training for that job assignment has not previously been provided, and (3) whenever the employer is made aware of new or previously unrecognized hazards, and (4) for supervisors to familiarize themselves with the workplace violence hazards to which employees under their immediate direction and control may be exposed.

Training shall be provided on the following:

1. This Plan, including the definitions and requirements as provided in this Plan; how to obtain a copy of this Plan at no cost; and how to participate in the development and implementation of this Plan, as described in this section and in the section "Responsible Persons – Employee Involvement."
2. Reporting workplace violence incidents or concerns to DEB Construction or law enforcement without fear of reprisal, as described in the "Communications," "Reports of Workplace Violence" and "Response to Workplace Violence," sections of this Plan.
3. Workplace violence hazards specific to employees' jobs, the corrective measures DEB Construction has implemented, how to seek assistance to prevent or respond to violence, and strategies to avoid physical harm such as how to recognize workplace violence hazards, including the risk factors associated with the four types of workplace violence and ways to defuse hostile or threatening situations.

4. The Workplace Violence Incident Log and how to obtain copies from DEB Construction.
5. Records of workplace violence hazard identification, evaluation, and correction and how to obtain copies from DEB Construction.
6. Training records and how to obtain copies from DEB Construction.
7. Opportunities DEB Construction has for interactive questions and answers with a person knowledgeable about this Plan.

2. **Additional Training – As Needed**

Additional training shall be provided when a new or previously unrecognized workplace violence hazard has been identified and when changes are made to this Plan. The additional training may be limited to addressing the new workplace violence hazard or changes to this Plan.

3. **OPTIONAL TOPICS FOR SPECIFIC WORKPLACE SECURITY TRAINING**

DEB Construction provides training to all employees regarding general workplace security practices and issues, including how to recognize alerts, alarms, or other warnings about emergency conditions and how to use identified escape routes or locations for sheltering/employee routes of escape/ emergency medical care provided in the event of any violent act upon an employee/ post-event trauma counseling for employees desiring such assistance.

In addition, DEB Construction provides specific training to all employees regarding workplace security hazards unique to their job assignment, to the extent that such information was not already covered in other training.

**Type I Violence Training** – For  Managers  Supervisors  Employees

- General Crime Awareness, including high-crime areas
- Locations and Operations of Alarms
- Communications Procedures
- Working in isolation
- Working with money
- Working late at night
- Working in areas with poor visibility or low lighting
- Other: \_\_\_\_\_

**Type II Violence Training** – For  Managers  Supervisors  Employees

- Self-Protection
- Location, operation, care and maintenance of alarms and other protection devices
- Use of the "Buddy System" or other assistance from co-workers
- Customers and/or clients with history of violent behavior

Other: \_\_\_\_\_

**Type III and IV Violence Training** – For  Managers  Supervisors  Employees

- Managing with respect and consideration
- Working with individuals with a history of violent behavior
- High-stress times such as impending layoffs
- Access to potential or improvised weapons such as scissors, tools, etc.
- Domestic violence involving spouse/domestic partner/former spouse/domestic partner at work
- Restraining Orders
- Other: \_\_\_\_\_

## **HAZARD IDENTIFICATION, EVALUATION AND CORRECTION**

### **A. Hazard Identification and Evaluation**

DEB Construction shall conduct inspections for workplace violence hazards on a periodic basis. Periodic inspections consist of identification, evaluation and correction of workplace security hazards, unsafe conditions and work practices, and employee reports and concerns. Hazards identified during the inspections must be documented.

Periodic inspections shall be conducted at a minimum as follows:

1. When this Plan is first established.
2. When DEB Construction is made aware of new or previously unrecognized workplace violence hazards.
3. After each workplace violence incident.
4. Whenever there is a report of workplace violence.
5. Annually

Inspections must be documented using effective means to identify, evaluate and correct workplace violence hazards, including, assessment procedures and checklists, including the Hazard Identification, Evaluation and Correction Record (Attachment F) and the Hazard Periodic Inspection Checklists (Attachment E). The date and name of the person conducting the inspections shall be documented. Any deficiencies must be documented and reported to the Health and Safety Officer and/or Health and Safety. Items will be addressed in a timely manner based on the severity of the hazard.

Periodic inspections may require assessing more than one type of workplace violence. DEB Construction performs inspections for each type of workplace violence by using the methods specified in this Plan and in DEB Construction’s assessment procedures and checklists.

All identified hazards must be corrected, as described below in the subsection “Hazard Correction.” This includes hazards identified during the inspections, by employee concerns, by Violent Incident Report Forms, by workplace violence incidents, or whenever DEB Construction is made aware of a new or previously unrecognized hazard.

Records of workplace violence hazard identification, evaluation, and correction shall be created and maintained for a minimum of five years. Please see the “Records” Section of this Plan.

The following personnel shall conduct periodic inspections of the following facilities and sites.

INSPECTOR NAME/ JOB TITLE	FACILITY/DEPARTMENT/OPERATION/ SITE
Tim Jones – Health and Safety Officer	Field
Jean Lee – Health and Safety Administrator	Office

## 1. **METHODS FOR PERIODIC INSPECTIONS**

Periodic inspections may include the following:

1. Review all workplace violence incidents that occurred in the facility and/or site within the previous year, regardless of whether an injury occurred.
2. Review all reported workplace violence concerns, including those communicated to DEB Construction in accordance with the "Communications" and "Reports of Workplace Violence" sections of this Plan.
3. Identify and evaluate environmental risk factors for workplace violence in each facility and/or site, including surrounding areas, such as employee parking areas and other outdoor areas.
4. An assessment of the following specific environmental risk factors:
  - a. Lack of posting of emergency telephone numbers for law enforcement, fire, and medical services.
  - b. Lack of employee access to a telephone with an outside line.
  - c. Adequacy of workplace security systems, such as door locks, entry codes or badge readers, security windows, physical barriers and restraint systems.
  - d. The exterior and interior of the workplace for its attractiveness to criminals.
  - e. Procedures for employee response during a robbery or other criminal act, including DEB Construction policy regarding prohibiting employees, who are not security guards, from confronting violent persons or persons committing a criminal act.
  - f. Employees working in locations isolated from other employees because their assignment requires them to work alone, in remote locations, during night or early morning hours, or where an assailant could prevent entry into the work area by responders or other employees.
  - g. Poor illumination or blocked visibility of areas where possible assailants may be present.
  - h. The need for surveillance measures, such as mirrors or cameras.
  - i. Lack of physical barriers between employees and persons at risk of committing workplace violence.
  - j. Access to and freedom of movement within the workplace by non-employees, including recently discharged employees or other persons with whom an employee is having a dispute.

- k. Lack of effective escape routes.
- l. Lack of a designated safe area where employees can go to in an emergency.
- m. Effective location and functioning of emergency buttons and alarms.
- n. Obstacles and impediments to accessing alarm systems.
- o. Effectiveness of systems and procedures that warn others of actual or potential workplace violence danger or that summon assistance, including alarms, panic buttons, or other alerts.
- p. Locations within the facility where alarm systems are not operational.
- q. Entryways where unauthorized entrance may occur, such as doors designated for staff entrance or emergency exits.
- r. Procedures for reporting suspicious persons or activities.
- s. Storage of high-value items or currency.
- t. Community-based risk factors, such as information relating to local crime conditions and the local police contact information.
- u. Frequency and severity of threatening or hostile situations that may lead to violent acts by customers and/or clients.
- v. Employees' skill in safely handling threatening or hostile customers and/or clients.
- w. Availability of security guards.
- x. The use of work practices such as the "buddy" system for specified emergency events.
- y. Failure to follow DEB Construction's communication procedures and processes, in accordance with the "Communications" section of this Plan.
- z. Frequency and severity of employees' reports of threats of physical or verbal abuse by managers, supervisors, or other employees.
- aa. Any prior violent acts, threats of physical violence, verbal abuse, or property damage in the workplace.

**B. Hazard Correction**

DEB Construction shall correct workplace hazards which threaten the security of employees in a timely manner based on the severity of the hazard. DEB Construction shall correct hazards when observed or discovered. Hazard correction must be documented using effective means, including, assessment procedures and checklists, including the Hazard Identification,



Evaluation and Correction Record (Attachment F) and the Hazard Periodic Inspection Checklists (Attachment E).

When an imminent hazard exists which cannot be immediately corrected without endangering employee(s) and/or property. DEB Construction shall remove all exposed personnel from the area except those necessary to correct the existing condition. Employees necessary to correct the hazardous condition shall be provided the necessary safeguards.

DEB Construction shall inform employees regarding completed workplace violence investigations conducted pursuant to this Plan and the records of any corrective action taken, in accordance with this section and the "Communications" section of this Plan.

## 1. **METHODS FOR HAZARD CORRECTION**

DEB Construction shall use engineering and work practice controls to eliminate or minimize employee exposure to the identified hazards to the extent feasible. DEB Construction shall take measures to protect employees from imminent hazards immediately. Hazard correction will be specific to a given facility and/or site.

Corrective measures may include, as applicable, but shall not be limited to:

1. Making the workplace unattractive to criminals by installing and maintaining lighting around and at the workplace.
2. Posting of emergency telephone numbers for law enforcement, fire, and medical services.
3. Ensuring employees have access to a telephone with an outside line.
4. Providing functioning systems, such as door locks, violence windows, physical barriers, emergency alarms and other restraint systems.
5. Ensuring sufficient numbers of staff are trained and available to prevent and immediately respond to workplace violence incidents during each shift, including the use of security guards.
6. Providing line of sight or other immediate communication in all areas where members of the public may be present. This may include removal of sight barriers, provision of surveillance systems or other sight aids such as mirrors, use of a buddy system, improving illumination, or other effective means.
7. Configuring facility spaces so that employee access to doors and alarm systems cannot be impeded by persons or obstacles.
8. Configuring facility spaces to control and limit freedom of movement within, the workplace by non-employees, including recently discharged employees or persons with whom an employee is having a dispute.

9. Ensuring adequate employee escape routes.
10. Maintaining sufficient staffing who can maintain order in the facility and respond to workplace violence incidents in a timely manner.
11. Installing, implementing, and maintaining the use of an alarm system or other effective means by which employees can summon security and other aid to defuse or respond to an actual or potential workplace violence emergency.
12. Providing training and re-training, including as provided in the "Training" section of this Plan, including on DEB Construction's emergency action procedures, reporting workplace violence concerns and incidents, awareness of the warning signs of potential workplace violence, handling threatening or hostile situations that may lead to violent acts by customers and/or clients.
13. Providing procedures for a "buddy" system during specified times and for specified emergency events.
14. Establishing a policy for prohibited practices.
15. Ensuring all employees report workplace violence concerns and incidents, including suspicious persons, activities and packages, in accordance with the "Communications" and Reports of Workplace Violence" sections of this Plan.
16. Ensuring communication in accordance with the "Communications" section of this Plan.
17. Ensuring an appropriate response to workplace violence concerns and incidents, and other issues such as verbal abuse or property damage are reported to the appropriate supervisor or manager and resolved in accordance with this Plan and DEB Construction policy.
18. Ensuring appropriate discipline for employees for workplace violence incidents, in accordance with this Plan and the current DEB Employee Handbook.

## **INVESTIGATIONS AND POST-INCIDENT RESPONSE**

DEB Construction must investigate workplace violence, concerns of workplace violence and injuries from workplace violence, regardless of how they are reported or how DEB Construction becomes aware of them. In addition to the procedures discussed above in the "Communication" and "Hazard Identification, Evaluation and Correction" sections of this Plan, DEB Construction shall promptly investigate and communicate with an employee regarding employee concerns of workplace violence and conduct investigations to prevent or respond to workplace violence.

The primary goal of investigation is the prevention of similar incidents. Management, administrative and supervisory personnel, and the Health and Safety Officer and/or Health and Safety Administrator are responsible for ensuring investigations in their areas of responsibility are conducted.

Investigative reports prepared in accordance with this Plan shall not contain information, such as a person's name, address, electronic mail address, telephone number, social security number, or other information that, alone or in combination with other publicly available information, reveals the person's identity.

The Workplace Violence Incident Report (Attachment A) requests details of the incident, including what happened, why it happened, what should be done to prevent it from happening again and what action has been taken to reduce or eliminate future incidents. Please also refer to the "Reports of Workplace Violence" section of this Plan.

In the event an employee is injured or sought medical treatment, supervisors shall also comply with the appropriate procedures, including completing the required entries or forms, such as OSHA Log 300 or 300A, Cal/OSHA Form 301 Injury and Illness Incident Report, and/or California Department of Industrial Relations, Division of Workers' Compensation Form DWC-1 (Workers' Compensation Claim Form). Please also refer to the "Reports of Workplace Violence" section of this Plan. Should an injury qualify as a "serious" injury as defined by Title 8 CCR Section 330, DEB Construction must report the injury to Cal/OSHA if required by Title 8 CCR Section 342.

When an employee reports workplace violence or a concern of workplace violence or when DEB Construction otherwise becomes aware of a concern of possible or actual workplace violence, DEB Construction shall conduct an investigation and respond to the workplace violence. The Health and Safety Officer and/or Health and Safety Administrator or other designated person shall conduct the investigation.

DEB Construction offers a variety of support and resources for employees affected by workplace violence, including the Employee Assistance Program and/or counseling services as described in DEB Construction's benefits package.

Procedures for investigating workplace violence incidents may include:

**A. REQUIRED INVESTIGATIVE ACTIVITIES**

1. Informing employees how concerns will be investigated and how the employees will be informed of the results of the investigations and any corrective action, in accordance with the "Communications" and "Hazard Identification, Evaluation and Correction" sections of this Plan.

**B. OPTIONAL INVESTIGATIVE ACTIVITIES**

1. Reviewing any relevant previous incidents.
2. Interviewing the affected employee(s) and any witnesses, including law enforcement and/or security personnel.
3. Preparing appropriate summaries of the interviews.
4. Visiting the scene of the alleged incident as soon as possible.
5. Examining the workplace for factors associated with the incident, including any previous reports of inappropriate behavior by the perpetrator.
6. Reviewing any relevant physical, electronic or other evidence, such as video footage, photographs, and/or emails or other communications.
7. Coordinating, to the extent necessary and feasible, with any law enforcement investigation.
8. Determining the cause of the incident.
9. Taking corrective action to correct the hazards and prevent the incident from reoccurring.
10. Preparing a written report of findings and any action taken, and ensuring corrective action is taken.
11. Obtain any reports completed by law enforcement, if possible.

The requirements and procedures of this section are in addition to those described elsewhere in this Plan and those which will be taken in accordance with DEB Construction's policy regarding investigating misconduct and/or discipline. An investigation in accordance with those policies, and other applicable policies, may serve as an investigation under this Plan.

**C. REQUIRED RESPONSE TO EMPLOYEE CONCERNS**

To the extent not addressed in accordance with this section and the "Communication" and "Hazard Identification, Evaluation and Correction" sections of this Plan, DEB Construction may investigate and communicate with employees regarding their concerns using the following:

1. **METHODS TO INFORM EMPLOYEES OF INVESTIGATIONS AND CORRECTIVE ACTIONS**

1. Updating the employee on the status of the investigation into the employee's concern and any relevant corrective action.
2. Providing the employee a copy of any completed workplace violence investigation conducted pursuant to this Plan relevant to the employee's concern and the records of any corrective action taken. No personally identifying information of any other employee which is the subject of the investigation will be provided to employee(s) not involved in the incident.
3. The employee's first line supervisor and/or the Health and Safety Officer and/or Health and Safety Administrator meeting with the employee to discuss the concerns, the investigation and the corrective actions to be taken.
4. Sending the employee via email a summary of the employee's concern, the investigation and actions taken in response to the employee's concern.
5. Posting any completed workplace violence investigation conducted pursuant to this Plan and the records of any corrective action taken to an internal bulletin board and/or site. No personally identifying information will be posted or otherwise made publicly available.

## **WORKPLACE VIOLENCE INCIDENT LOG**

DEB Construction shall record information regarding incidents of workplace violence in the Workplace Violence Incident Log. (Attachment D) The Log shall contain the information requested in the Log about all incidents, the post-incident response and incident investigation.

DEB Construction shall prepare the Log based on information solicited from involved employees, including those who experienced the violent incident; on witness statements; and on the findings of investigations into workplace violence incidents. The Log shall not contain any elements of personally identifiable information, such as a person's name, address, electronic mail address, telephone number, or Social Security number, or other information that, alone or in combination with other publicly available information, reveals any person's identity.

Workplace violence resulting in an injury requiring recording the information on the OSHA Log 300 or 300A, Cal/OSHA Form 301 Injury and Illness Incident Report, and/or California Department of Industrial Relations, Division of Workers' Compensation Form DWC-1 (Workers' Compensation Claim Form) must also be recorded on those documents, in addition to the Workplace Violence Incident Log. All OSHA forms and logs are processed and stored in accordance with the applicable laws and regulations relating to those forms.

For multiemployer worksites, the employer or employers whose employees experienced the workplace violence incident shall record the information in the Workplace Violence Incident Log and shall provide a copy of that log to the controlling employer.

## **PLAN REVIEW**

DEB Construction shall review and revise this Plan as provided below. DEB Construction shall review the Plan at least annually, when a deficiency is observed or becomes apparent, after a workplace violence incident, and as needed at any other time.

Review and any revision, as needed, of the Plan shall consist, at a minimum, of the following:

1. The Plan itself and the effectiveness of the Plan.
2. Procedures used to obtain the active involvement of employees in developing, implementing and reviewing the plan, as discussed in "Responsible Persons – Employee Involvement."
3. Workplace Violence Incident Log.

### **A. OPTIONAL ITEMS FOR REVIEW**

1. Investigations of alleged hazardous conditions or employee concerns.
2. Investigations of workplace violence incidents.
3. Written records of workplace violence issues discussed at committee meetings and employee meetings.
4. The effectiveness of security systems, including alarms, emergency response plans, and security personnel, if applicable.
5. Records of hazard identification, evaluation and correction.
6. Communications regarding safety and health issues.
7. Training programs as provided in the Plan.
8. DEB Construction's hotline, forms, and internal site where employees can provide suggestions, feedback or concerns regarding the Plan and/or violence at DEB Construction.
9. Any survey regarding the Plan and workplace violence at DEB Construction.

### **B. METHODS TO CONDUCT THE PLAN REVIEW**

DEB Construction shall conduct the review required by this section by the following methods:

1. Providing the Plan and proposed revisions to the Plan to employees at no cost before revisions are implemented and soliciting feedback from employees.
2. Interviewing employees regarding the proposed revisions and/or violence at DEB Construction.

3. The Health and Safety Officer and/or Health and Safety Administrator attend staff meetings of different facilities and/or sites throughout DEB Construction to obtain employee input.
4. Conducting periodic committee meetings and employee meetings.
5. Maintaining forms and an internal site where employees can provide suggestions, feedback or concerns regarding the Plan and/or violence at DEB Construction.
6. Distributing a survey regarding the Plan and workplace violence at DEB Construction.

DEB Construction shall communicate any revisions to the Plan to all employees, in accordance with the "Communications" section of this Plan.



## RECORDS

DEB Construction shall keep and maintain records as required by this Plan.

DEB Construction shall create training records, which shall include training dates, contents or a summary of the training sessions, names and qualifications of persons conducting the training, and names and job titles of all persons attending the training sessions, and maintain training records for a minimum of **one year:**

1. Employee Training Log. (See Attachment C)
2. Training Attendance Log. (See Attachment B)

To the extent feasible, any associated written materials or presentations shall be kept with the relevant Training Attendance Log.

DEB Construction shall create and maintain the following records for a minimum of **five years:**

1. Hazard Identification, Evaluation and Correction. (See Attachment E)
2. Workplace Violence Incident Log. (See Attachment D)
3. Records of workplace violent incident investigations conducted pursuant to this Plan. These records shall not contain "medical information" as defined by California Civil Code Section 56.05(j).

The following records shall be made available to employees, upon request and without cost, for examination and copying within 15 calendar days of a request: (1) Records of workplace violence hazard identification, evaluation and correction; (2) Training records showing the training dates, contents or a summary of the training sessions, names and qualifications of persons conducting the training, and names and job titles of all persons attending the training sessions (see Attachments B and C); and (3) the Workplace Violence Incident Log. Any employee's personally identifiable information shall not be released, except as authorized by law. All records required by this Plan shall be made available to Cal-OSHA upon request and as required by law.

## **REPORTING RESPONSIBILITIES**

As required by California Code of Regulations (CCR), Title 8, Section 342(a). Reporting Work-Connected Fatalities and Serious Injuries, DEB Construction will immediately report to Cal/OSHA any serious injury or illness (as defined by CCR, Title 8, Section 330(h)), or death (including any due to Workplace Violence) of an employee occurring in a place of employment or in connection with any employment.

**ACKNOWLEDGMENT OF RECEIPT**

I have received a copy of the DEB Construction’s Workplace Violence Prevention Plan (the “Plan”) and understand that it contains important information about the Company’s workplace safety and security policies and about my rights, responsibilities and obligations as an employee. I acknowledge that I have read, understand, and will adhere to the Company Plan and that I have familiarized myself with the material in the Plan. I understand that the Company may change, rescind, delete, or add to any policies, benefits, and practices described in the Plan from time to time, at its sole and absolute discretion, with or without prior notice.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name



## Workplace Violence Incident Report – Attachment A

<b>Employee Name</b>	
<b>Name/Title/Contact Information of Person Completing Form</b>	

<b>Date/Time</b>	<b>Location/Department</b>	<b>Incident Description</b>	<b>Violence Committed By?<sup>1</sup></b>

**Type of Incident:** (check all that apply)

- Physical attack without a weapon (e.g. biting, choking, grabbing, hair pulling, kicking, punching, slapping, pushing, pulling, scratching, or spitting)
- Attack with a weapon (e.g. gun, knife, other object)
- Threat of physical force or use of a weapon or other object
- Sexual assault or threat (rape or attempted rape, physical display, or unwanted verbal or physical sexual contact)
- Verbal Harassment
- Animal Attack
- Other: \_\_\_\_\_

**Incident Location Specifics:** (check all that apply)

- Office
- Jobsite
- Hallway
- Restroom/Bathroom
- Parking Lot
- Other Area Outside Building
- Personal Residence
- Break Room
- Cafeteria
- Other: \_\_\_\_\_

<sup>1</sup> The perpetrator will be classified as: (1) client or customer; (2) family or friend of a client or customer; (3) stranger with criminal intent; (4) co-worker, supervisor or manager of victim, (5) partner or spouse, parent or relative of victim, or (6) other perpetrator.



**Incident Specifics:** (check all that apply)

- Victim Performing Usual Job Duties
- Poor Lighting
- Rushed
- Working During Low Staffing Level
- High Crime Area
- Isolated/Alone
- Unable to Get Help/Assistance
- Working in a Community Setting
- Working in an Unfamiliar/New Location

**Consequence Specifics:** (check all that apply)

- Medical Treatment Provided
  - Assistance Provided to Conclude Incident (detail in Incident Description)
  - Security Contacted
  - Law Enforcement Contacted
  - Lost Time of Work Hours: \_\_\_\_\_
  - Actions Requested to Protect from Continuing Threat (if any):
-











SPECIALIZED BUILDERS




## Workplace Violence Incident Report – Attachment D

<b>Name/Title of Person Completing Form</b>	
<b>Date Complete</b>	

Log No.	Date/Time	Location/Department	Incident Description	Violence Committed By? <sup>1</sup>

**Type of Incident:** (check all that apply) (as defined in the “Definitions” section)

Type 1 Incident  Type 2 Incident  Type 3 Incident  Type 4 Incident

- Physical attack without a weapon (e.g. biting, choking, grabbing, hair pulling, kicking, punching, slapping, pushing, pulling, scratching, or spitting)
- Attack with a weapon (e.g. gun, knife, other object)
- Threat of physical force or threat of use of a weapon or other object
- Sexual assault or threat (rape or attempted rape, physical display, or unwanted verbal or physical sexual contact)
- Verbal Harassment
- Animal Attack
- Other: \_\_\_\_\_

**Incident Location Specifics:** (check all that apply)

- Office
- Jobsite
- Hallway
- Restroom/Bathroom
- Parking Lot
- Other Area Outside Building
- Personal Residence
- Break Room
- Cafeteria
- Other: \_\_\_\_\_

<sup>1</sup> The perpetrator will be classified as: (1) client; (2) customer; (3) family or friend of a client or customer; (4) stranger with criminal intent; (5) co-worker, supervisor, or manager of victim, (6) partner or spouse, parent or relative of victim, or (7) other perpetrator.



**Incident Circumstances:** (check all that apply)

- Victim Performing Usual Job Duties
- Poor Lighting
- Rushed
- Working During Low Staffing Level
- High Crime Area
- Isolated/Alone
- Unable to Get Help/Assistance
- Working in a Community Setting
- Working in an Unfamiliar/New Location
- Other: \_\_\_\_\_

**Consequence Specifics:** (check all that apply)

- Security Contacted/Law Enforcement Contacted
- Law Enforcement/Security Response: \_\_\_\_\_
- Actions Taken to Protect from Continuing Threat or Other Hazards Identified as a Result of Incident (if any): \_\_\_\_\_
- Other: \_\_\_\_\_

**Injuries:**

Description: \_\_\_\_\_

Medical responders other than Law Enforcement Contacted. If so, describe:  
\_\_\_\_\_  
\_\_\_\_\_

Did the severity of the injuries require reporting to Cal/OSHA? If so, date and time and representative contacted:  
\_\_\_\_\_  
\_\_\_\_\_



## Hazard Periodic Inspection Checklist – Attachment E

<b>Date</b>	
<b>Facility/Operation/Department</b>	

### STAFFING / SECURITY

HAZARD	PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
Lack of designated security personnel, including chief of security/safety	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Designate personnel responsible for security	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Failure to communicate contact information for security personnel to all employees	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Communicate contact information for security personnel to all employees	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Emergency telephone numbers for law enforcement, fire and medical services not accessibly posted	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Post emergency telephone numbers for law enforcement, fire and medical services where employees can access it	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Security not posted/located in vulnerable areas (e.g. parking lot, reception area, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Post / locate security staff in vulnerable locations.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Staff not available to escort employees upon request or as needed (e.g. to the parking lot, etc.) and a contact number provided	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Staff identified and available to escort employees on request or as needed and a contact number provided	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	



**TRAINING**

HAZARD	PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
Required training not done on schedule in accordance with the Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Perform training in accordance with the Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees not trained on the Plan and topics required by the Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	All employees trained on the Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees not trained to recognize and handle threatening or hostile situations that may lead to violent acts	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Employees trained to recognize and handle threatening or hostile situations that may lead to violent acts	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees not trained to respond to violent incidents	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Employees trained to respond to violent incidents	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees not trained to recognize the potential for violence, factors contributing to the escalation of violence and how to counteract them, and when and how to seek assistance to prevent or respond to violence. violence, and strategies to avoid physical harm.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Employees trained to recognize the potential for violence, factors contributing to the escalation of violence and how to counteract them, and when and how to seek assistance to prevent or respond to violence. violence, and strategies to avoid physical harm.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	



## ENGINEERING / FACILITIES

HAZARD	PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
No fences, gates, walls or other barriers around workplace	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install fences, gates, walls or other barriers around workplace	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Entrances not visible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Make entrances visible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Workplace attractive to thieves	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Make workplace unattractive to thieves	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
No employee-only parking area	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide employee-only parking area	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Landscape and areas around workplace and parking lots not maintained to minimize hiding places	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Maintain landscape and area around workplace and parking lots to minimize hiding places	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Inadequate lighting in the parking areas and approaches to workplace	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install adequate lighting in the parking areas and approaches to the workplace	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Access to the facility/department/operation and freedom of movement within it not controlled, consistent with business necessity.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Access to the workplace and freedom of movement within it controlled, consistent with business necessity.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	



HAZARD		PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
	No controlled / Escorted access in certain situations (e.g. discharged employee, concerns regarding an employee)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Procedures to control and/or escort employees in certain situations (e.g. discharged employee, concerns regarding an employee)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Does the workplace lack:					
	Secured entry (e.g. fobs, buzzers)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Secured entry system	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Physical barriers (Plexiglass, elevated counters, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Installed appropriate barriers	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Locks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install locks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Alarms	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install alarms	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	



HAZARD		PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
	Panic alarms/ buttons (portable or fixed)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install or provide panic alarms	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Screening devices (e.g. metal detectors, x-ray machines)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install screening devices	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Line of sight between employees in work areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide line of sight between employees in work areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Surveillance lacking:		<input type="checkbox"/> Yes <input type="checkbox"/> No	Using surveillance, such as cameras or mirrors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Mirrors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install mirrors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Cameras - interior and exterior	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install cameras	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Other surveillance	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Install other surveillance	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Insufficient available employee escape routes		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Establish/designate employee routes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Exit doors					





HAZARD		PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
	Opened from inside or outside	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Exit doors are only able to be opened from the inside	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Opened from the direction of exit travel with tools or special knowledge or effort	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Exit doors are opened from the direction of exit travel without tools or special knowledge or effort	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Spaces configured so that access to doors and/or alarm systems is impeded		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Configure space so that access to doors and/or alarm systems is not impeded	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Furniture not secured to floor		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Secure furniture to floor	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	



**WORK PRACTICE CONTROLS**

HAZARD		PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
Public access not restricted consistent with business necessity		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Restrict public access consistent with business necessity	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees not provided with maps and/or clear directions to their workspaces and entrances and exits		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide employees with maps and/or clear direction to their workspaces and entrances and exits	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees not provided with a designated safe area in case of emergency.		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Employees provided with a designated safe area in case of emergency.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lack of posted floor plans showing entrances, exits and the location of security, visible only to authorized personnel		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Post floor plans posted showing entrances, exits and the location of security, visible only to authorized personnel	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lack of appropriate security measures for employees working in special situations					
	Working late at night	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Institute appropriate security measures for employees working late at night	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Working by themselves	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Institute appropriate security measures for employees working by themselves	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	



<b>HAZARD</b>	<b>PRESENT</b>	<b>CORRECTION</b>	<b>CORRECTED</b>	<b>NOTES / FOLLOW UP</b>
Visitors or clients not escorted when on premises	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Escort all visitors and clients when on premises	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees, visitors and clients not required to wear badges or other identification	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Require all employees, visitors and clients to wear badges or other identification	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees without access to a telephone with an outside line	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide employees access to a telephone with an outside line in case of an emergency	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
No procedures to report suspicious persons or activities	<input type="checkbox"/> Yes <input type="checkbox"/> No	Employees have access to contact information for security and law enforcement and are instructed how to report suspicious persons and activities	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Workplace Violence Prevention Plan not communicated and/or provided to all employees	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Workplace Violence Prevention Plan provided to all employees	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees not trained on recognizing and responding to violence, including active shooter	<input type="checkbox"/> Yes <input type="checkbox"/> No	Employees trained on response to violence, including active shooter	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	



HAZARD	PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
No communication procedures for employees to report workplace violence concerns, including threats, physical violence and property damage, without fear of reprisal	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Implement communication procedures for employees to report workplace violence concerns	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
No communication procedures between employees and between shifts, facilities, operations and/or departments regarding conditions that may increase potential for workplace violence	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Implement communication procedures between employees and between shifts, facilities, operations and/or departments regarding conditions that may increase potential for workplace violence	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Valuables present on site or during exchange (e.g. cashier, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Limit the amount of valuables on site and keep only small bills in a cash register; use time access safes and deposit large bills as they are received; use only one cash register after dark and keep its drawer empty and open	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employees work alone or isolated.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Employees use a "buddy system" or a check-in system	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	



HAZARD	PRESENT	CORRECTION	CORRECTED	NOTES / FOLLOW UP
Lack of appropriate discipline procedures for employees who commit workplace violence, including threats	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide appropriate discipline procedures for employees who commit workplace violence, including threats	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Lack of appropriate procedures for controlling the movement of recently discharged employees	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide appropriate procedures to control the movement of recently discharged employees	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Employee Assistance Program or other counseling not available to employees who exhibit behaviors or signs of strain that may lead to workplace violence	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Provide an Employee Assistance Program or other counseling to employees who exhibit behaviors or signs of strain that may lead to workplace violence	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	



## Hazard Identification, Evaluation, and Correction Record – Attachment F

<b>Date of Inspection</b>	
<b>Persons Conducting Inspection</b>	

<b>1. Persons Reporting:</b>
<b>2. Unsafe Condition, Work Practice or Employee Concern (include what, who, when, where, and how it is unsafe):</b>
<b>3. Causes of Other Contributing Factors (What caused or contributed to the unsafe condition?):</b>
<b>4. Persons Involved:</b>
<b>5. Corrective Action Taken and Date:</b>
<b>6. Preventive Action (if any):</b>
<b>7. Description of Hazard Correction:</b>
<b>8. Date Received by the Health and Safety Officer and/or Health and Safety Administrator:</b>